

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL070008	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED R 03/09/2016
NAME OF PROVIDER OR SUPPLIER WATERBROOKE OF ELIZABETH CITY		STREET ADDRESS, CITY, STATE, ZIP CODE 143 ROSEDALE DRIVE ELIZABETH CITY, NC 27909		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{C 000}	Initial Comments This report is of a Followup Survey done by Bob Getchell on March 9, 2016. The followup survey revealed that all deficiencies have not been completed, therefore a new plan of correction is required.	{C 000}		
{C 166}	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility is not free from hazards. Loose, detached or raised exterior surface materials are in the exit path from and exit door. Followup Findings on 3-9-16 include: a. Special Care Unit Patio - There are tiles on the patio surface in the exit path that have become detached from the subsurface, are loose and/or raised above the horizontal plane of the patio. (50% complete)	{C 166}	C 166 1. Tiles near maintenance office exterior door has been secured and re-grouted. 2. Due to weather, low temps and rain, tiles were unable to be repaired prior to return. As of 3-16-16, tiles have been secured or replaced and grouted.	3-16-16
{C 175}	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following	{C 175}		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

DR Smith

TITLE

Administrator

(X6) DATE

3-25-16

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{C 175}	Continued From page 1 furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility has failed to provide individual bathroom furnishings by not having the required quantity of furnishings for each room resident. Followup Findings on 3-9-16 include: a. There is not an individual towel rack for each resident using the shared resident room bathrooms. (50% complete)	{C 175}	C175 Every room has been furnished with a towel hook for each resident	3-14-15
{C 184}	Fire Safety-Evacuation plan SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (a) A written fire evacuation plan (including a diagrammed drawing) which has the written approval of the local Code Enforcement Official shall be prepared in large print and posted in a central location on each floor of an adult care home. The plan shall be reviewed with each resident on admission and shall be a part of the orientation for all new staff. (f) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation the facility failed to provide in a central location a diagrammed drawing approved by the local code official showing in large print the evacuation routes from	{C 184}	C184 A new frame for diagram was purchased and diagram was placed back on the wall after a resident accidentally bumped and broke the existing frame.	3-15-16

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{C 184}	Continued From page 2 the a potion of the building. Followup Findings on 3-9-16 include: a. There is not an evacuation plan showing evacuation routes posted for the central corridor area of the building.	{C 184}		
{C 189}	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. Followup Findings on 3-9-16 include: b. When activated the central or master override switches did not de-energize the magnetic door locks.	{C 189}	C189 Mag lock wiring had to be repaired and re-routed to switches at Master only. All individual switches were working. Repair has been complete and tested.	3-10-16